

City:

City:

Signature:

Zip:

Zip:

Email Address:

Home Phone:

Home Phone:

College Player?

College Player?

DOB:

DOB

Street Address:

Street Address:

Last Name:

10 First Name:



	Team Name:	Sport:	Manager Name:
		League:	Manager Phone: H: W:
HOLD HARMLESS/PLAYER WAIVER: Participation in sporting events necessarily involved physical exertion and the risk of physical exertion and the risk of physical injuries and/or death. The undersigned voluntarily chooses to engage in such sporting events. The undersigned hereby waives for himself/herself and their heirs, executers and administrators any and all claims, causes of actions, rights or claims that they make the property of the rights of the rights and their heirs, executers and administrators any and all claims, causes of actions, rights or claims that they make the rights and their heirs, executers and administrators any and all claims, causes of actions, rights or claims that they make the rights and their heirs, executers and administrators any and all claims, causes of actions, rights or claims that they make the rights and their heirs, executers and administrators any and all claims, causes of actions, rights or claims that they make the rights and r			
have which may arise against the City of Renton, its agents, employees, boards and commissions which may arise out of injuries suffered by or inflicted by the undersigned cometeing in or in connection with participation in any athletic program. The undersigned warrants to the City that he or she has no known illness or injury which would be aggravated by strenuous exercise. If the participant is a minor, this waiver must be signed by the minor's parent or guardian. I hereby give permission to the City of Renton and the Recreation Division to use any photos taken during this activity in publication programs or activities within the City. By signing this roster, players agree to abide by the Renton Parks & Recreation Department League/Sport Rules &			
	ulations. The City of Renton is not responsible for lost of stolen property. Alcoholic beverages are strictly prohibited.	,,,,,	
11	First Name: Last Name:	Signature:	Email Address:
	Street Address:	City:	Zip: Home Phone: College Player? DOB:
12	First Name: Last Name:	Signature:	Email Address:
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13	First Name: Last Name:	Signature:	Email Address:
	Street Address:	City:	Zip: Home Phone: College Player? DOB:
14	First Name: Last Name:	Signature:	Email Address:
	Street Address:	City:	Zip: Home Phone: College Player? DOB:
15	First Name: Last Name:	Signature:	Email Address:
	Street Address:	City:	Zip: Home Phone: College Player? DOB:
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	Street Address:	City:	Zip: Home Phone: College Player? DOB:
19	First Name: Last Name:	Signature:	Email Address:
	Street Address:	City:	Zip: Home Phone: College Player? DOB:
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20	First Name: Last Name:	Signature:	Email Address:
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	Street Address:	City:	Zip: Home Phone: College Player? DOB: